

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 2  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>WOMEN SPEAK OUT PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00530766																									
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td></td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td></td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table>		M	M					D	D					Y	Y	Y	Y	Y	Y						
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Full Name of Payee <b>Headway Workforce Solutions Inc.</b>			Date of Public Distribution/Dissemination <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>09</td></tr> </table> <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>01</td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>2020</td></tr> </table>			09	01	2020
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Mailing Address 3100 Smoketree Ct. Suite 900			Amount <table border="1" style="display:inline-table; width:100%"> <tr><td>2400.00</td></tr> </table>			2400.00		
2400.00								
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.18628					
Purpose of Expenditure Canvassing / Travel		Category/ Type	Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>09</td></tr> </table> <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>01</td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>2020</td></tr> </table>			09	01	2020
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Name of Federal Candidate ROY, CHIP, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 21 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX					
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="display:inline-table; width:100%"> <tr><td>40269.15</td></tr> </table>	40269.15	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶				
40269.15								

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2400.00								
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.18629					
Purpose of Expenditure Canvassing / Travel		Category/ Type	Date of Disbursement or Obligation <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>09</td></tr> </table> <table border="1" style="display:inline-table; margin:0 5px;"> <tr><td>01</td></tr> </table> <table border="1" style="display:inline-table;"> <tr><td>2020</td></tr> </table>			09	01	2020
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Name of Federal Candidate DAVIS, WENDY, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 21 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX					
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="display:inline-table; width:100%"> <tr><td>42669.15</td></tr> </table>	42669.15	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶				
42669.15								

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<table border="1" style="display:inline-table; width:100%"> <tr><td>4800.00</td></tr> </table>	4800.00
4800.00		
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	<table border="1" style="display:inline-table; width:100%"> <tr><td></td></tr> </table>	
(c) TOTAL Independent Expenditures.....▶	<table border="1" style="display:inline-table; width:100%"> <tr><td></td></tr> </table>	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date




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2020
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Signature

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Gross, Jennifer, , ,* **[Electronically Filed]** Date  09 /  03 /  2020

Signature